

**VILLAGE OF KEY BISCAYNE
FIRE RESCUE DEPARTMENT
FIRE WATCH PERMIT APPLICATION**

1. Name of Event: _____

2. Sponsoring Organization: _____

Mailing Address: _____

Person in Charge: _____ Telephone: _____

Person securing Permit Application: _____

A. Type of Event/Reason for Fire Watch: _____

B. Location of Event: _____

C. Dates of Event: _____

D. Time(s): _____

E. Estimated Attendance: _____

3. Fire Marshal's Office Requirements:

A. Assembly Permit required: Yes ____ No ____

(If yes, Assembly Permit application to be obtained from Building & Zoning – Bill Fehr)

B. Fire Inspectors required: Yes ____ No ____

C. Layout Sketch/Floor Plan required: Yes ____ No ____

D. Fire Rating for Tent: Yes ____ No ____

E. Pyrotechnics Permit required: Yes ____ No ____ \$ 160.00

F. Fireworks Shells List: Yes ____ No ____

G. Fireworks Insurance required: Yes ____ No ____

H. Will there be cooking or heating of Food? Yes ____ No ____

I. Bonfire Yes ____ No ____

4. Fire Apparatus Required: Yes ____ No ____

5. Costs Incurred for Village of Key Biscayne Fire Rescue Services:

A. Fire Inspectors / Fire Watch: \$40.00/hour for ____ hours (minimum of 4 hours) \$ _____

B. Paramedic: \$40.00/hour for ____ hours \$ _____

C. Firefighters: \$40.00/hour for ____ hours \$ _____

TOTAL COSTS: \$ _____

6. Additional Requirements to hold this Event: Yes ____ No ____

Applicant's Signature _____ Date: _____

Fire Department's Signature _____ Date: _____

***Check made payable to the Village of Key Biscayne must be received at the time of application and will be held until date of event. If event is canceled, please give at least 24 hours notice.**